Entry Blank—Please Type or Print					
Ms./Artist JAMES LUCAS					
(last name last)					
Address 215 HIGH ST. LEETONIA, OH Street					
44431 Daytime Tel. (216): 7423627 Zip areaH: 427-2401					
Zip areaH: 427-2401					
Temporary or Studio Address 1024 MAHONING AVE YOUNGTOWN Street					
Daytime Tel. ( )					
Zip area					
If you do not presently live in one of the counties of the Western Reserve, in which county were you born?					
Collaborator (if any)					
If May Show entries are not accepted or are not sold:  Artist will pick up at Museum.  Museum should dispose of.  Museum should ship to artist at artist's expense:					
Street					
City State Zip					
Special Instructions					
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Special Instructions  Entry Blank must be completed in full and signed; forms received unsigned will not be accepted.					
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## **Entry Blanks**

A Paint			□ Photog (sp	raphy ecify category)
Materials used (media	WOOD			
Title ALE	XANDE	RI	5 FRA	SCTILE
Price or NFS	Insurance Value if NFS Only		Size  A2" x 38" x 30"  height x width x depth	
	GRAPHICS AND PHO	TOGRAPH	Y ONLY	
Additional No. For Sale	Total No. in Edition	Price of Print Unframed		Price of Frame Only
ACCEPTED  NOT ACCEPTED	DO NOT WRITE IN  H-3  H-3  H-3		3	ACCEPTED  OT ACCEPTED
B Painti			☐ Photog	raphy ecify category
Materials used (media	D/CANV	ASS		
Title ART	T OF N	015	E	
Price or NFS	Insurance Value If NFS Only		Size 33"× 9" height x width x depth	
	GRAPHICS AND PHO	TOGRAPH		
Additional No. For Sale	Total No. in Edition	Price of Unframe		Price of Frame Only
ACCEPTED	DO NOT WRIT		ACCEPTED	REC'D
NOT ACCEPTED			NOT ACCEPT	ED DATE

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